IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of	Atty	PTB-4	017-124			1 12		
PONZI WAS TOWN	Dkt.	C#	M#		DF	John		
BONZI MAY 1 2 2010 TC/A.L	J.	3726				' /		
Serial No. 10/560.904 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	aminer:	Cadug	an, Erica E.			_1		
Filed: March 6, 2006 Title: APPARATUS FOR THE PRODUCTION OF CA	Date:	May 1	2, 2010					
Title: APPARATUS FOR THE PRODUCTION OF CA	APS			•				
Commissioner for Patents								
P.O. Box 1450 Alexandria, VA 22313-1450								
, working, with all the second								
Sir:	NGE/AR	/ENDM	ENT/LETTER					
This is a response/amendment/letter in the above-	identifie	d applic	ation and includ					
incorporated by reference and the signature below signature thereon.	serves	as the	signature to the	attachment in the absence	of ar	ny other		
☐ Correspondence Address Indicatio	n Forr	n Atta	ched.					
Fees are attached as calculated below:								
Total effective claims after amendment 84 previously paid for 85 (at least 20) =		highest x \$52.0	number 0	\$0.00 (1202)/\$0.00 (2202)	\$	0.00		
Independent claims after amendment 8 previously paid for 8 (at least 3) =		highest x \$220.	number 00	\$0.00 (1201)/\$0.00 (2201)	\$	0.00		
If proper multiple dependent claims now added fo	r first tin	ne, (ign						
Petition is hereby made to extend the current due	date so	as to c		0.00 (1203)/\$195.00 (2203) ate of this	\$	0.00		
paper and attachment(s)	One	Month	Extension \$130	0.00 (1251)/\$65.00 (2251)				
7				00 (1252)/\$245.00 (2252) .00 (1253/\$555.00 (2253)				
	Four	Month I	Extensions \$173	80.00 (1254/\$865.00 (2254)	ď	120.00		
Terminal disclaimer enclosed, add	rive iv	nonin E.).00 (1255/\$1175.00 (2255) 0.00 (1814)/ \$70.00 (2814)		130.00 0.00		
☐ Applicant claims "small entity" status. ☐ S	tatemer	nt filed h		0.00 (1014)/ 4/ 0.00 (2014)	Ψ	0.00		
Rule 56 Information Disclosure Statement Filing F				\$180.00 (1806)	\$	0.00		
Assignment Recording Fee	00			\$40.00 (8021)	\$	0.00		
Other:				Ψ40.00 (0021)	Ψ \$	0.00		
				TOTAL FEE	•	130.00		
◯ CREDIT CARD PAYMENT FORM	ATTA	CHE	D.		•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
The Commissioner is hereby authorized to charge any <u>deficiency</u> , or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140.								
901 North Glebe Road, 11th Floor	NIX	ON & V	ANDERHYE P.O	c				
Arlington, Virginia 22203-1808			aul T. Bowen, Re	A				
Telephone: (703) 816-4000 Facsimile: (703) 816-4100			,					
PTB:eaw	Sigr	nature:						

05/13/2010 SMOHAMME 00000026 10560904 01 FC:1251 130.60 OP

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of	Atty	PTB-4017-124						
ō	Dkt.	C# M #						
BONZI	TC/A.U.	3726	OPAR					
Serial No. 10/560,904	Examiner:	Cadugan, Erica E.	[80]					
Filed: March 6, 2006	Date:	May 12, 2010	(MAY 1 2 2010 w)					
Title: APPARATUS FOR THE PRODUCTION	ON OF CAPS		PARADEMARK OF					
Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450								
Sir:								
RESPONSE/AMENDMENT/LETTER This is a response/amendment/letter in the above-identified application and includes an attachment which is hereby incorporated by reference and the signature below serves as the signature to the attachment in the absence of any other signature thereon.								
☐ Correspondence Address Inc	lication Forn	n Attached.						
Fees are attached as calculated below: Total effective claims after amendment previously paid for 85 (at least		highest number \$52.00	\$0.00 (1202)/\$0.00 (2202) \$ 0.00					
Independent claims after amendment previously paid for 8 (at least 3)		highest number \$220.00	\$0.00 (1201)/\$0.00 (2201) \$ 0.00					
If proper multiple dependent claims now added for first time, (ignore improper); add \$390.00 (1203)/\$195.00 (2203) \$ 0.00 Petition is hereby made to extend the current due date so as to cover the filing date of this paper and attachment(s) One Month Extension \$130.00 (1251)/\$65.00 (2251) Two Month Extensions \$490.00 (1252)/\$245.00 (2252) Three Month Extensions \$1110.00 (1253/\$555.00 (2253) Four Month Extensions \$1730.00 (1254/\$865.00 (2254) Five Month Extensions \$2350.00 (1255/\$1175.00 (2255) \$ 130.00								
Terminal disclaimer enclosed, add	7 100 101		50.00 (1255/\$1175.00 (2255) \$ 130.00 40.00 (1814)/ \$70.00 (2814) \$ 0.00					
Applicant claims "small entity" status. Statement filed herewith								
Rule 56 Information Disclosure Statement	Filing Fee		\$180.00 (1806) \$ 0.00					
Assignment Recording Fee			\$40.00 (8021) \$ 0.00					
Other:			\$ 0.00					
			TOTAL FEE \$ 130.00					
CREDIT CARD PAYMENT FORM ATTACHED.								
The Commissioner is hereby authorized to charge any <u>deficiency</u> , or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140.								
901 North Glebe Road, 11th Floor Arlington, Virginia 22203-1808 Telephone: (703) 816-4000 Facsimile: (703) 816-4100 PTB:eaw	Ву А	ON & VANDERHYE F						
i i U.caw	Sign	ature:	I					